. Official	United States Bankruptcy Court Southern District of Illinois						Voluntary	Petition				
	ebtor (if ind <b>Annette I</b>		er Last, First	, Middle):	:		Name	of Joint Do	ebtor (Spouse	e) (Last, First,	Middle):	
(include mar	All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  FKA Annette Maria McCorkle							used by the J , maiden, and		in the last 8 years		
Last four dig	e, state all)	Sec. or Indi	vidual-Taxp	ayer I.D.	(ITIN)/Com	plete EIN	Last f	our digits o	of Soc. Sec. or	r Individual-T	Taxpayer I.D. (ITIN) N	o./Complete EIN
Street Addre 1050 No Collinsv	ess of Debto	or (No. and S	Street, City,	and State	):	ZIP Cod		Address of	f Joint Debtor	(No. and Str	eet, City, and State):	ZIP Code
County of R	esidence or	of the Princ	cipal Place o	f Busines		62234	Coun	ty of Reside	ence or of the	Principal Pla	ace of Business:	
Madisor		01 1110 1 1111	orpur i iuce o	T D ugilles				.,				
Mailing Add	lress of Deb	otor (if diffe	rent from str	eet addre	ss):		Maili	ng Address	of Joint Debt	or (if differer	nt from street address):	
					Г	ZIP Cod	le					ZIP Code
Location of (if different	Principal A from street	ssets of Bus address abo	siness Debtor ve):	r	1		•					
Œ	• •	f Debtor	1 )			of Busines	SS				tcy Code Under Whi	ch
(Form of Organization) (Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  The state of the debtor is not one of the above entities, check this box and state type of entity below.)  (Check one box) □ Health Care Business □ Single Asset Real Estate as do in 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Commodity Broker □ Clearing Bank □ Other					Chapt Chapt Chapt Chapt Chapt	ter 7 ter 9 ter 11 ter 12	☐ Ch of ☐ Ch of	napter 15 Petition for F a Foreign Main Proce napter 15 Petition for F a Foreign Nonmain Pr	eding Recognition			
Country of do Each country by, regarding	ebtor's center		eding	unde		the United	ble) nization States	defined "incuri	are primarily co d in 11 U.S.C. § red by an indivi onal, family, or	onsumer debts, § 101(8) as idual primarily	busin	s are primarily ess debts.
		0 \	heck one box	x)			k one box:		-	ter 11 Debto		
attach sign debtor is n Form 3A.	e to be paid in ned application unable to pay	n installments on for the cou fee except in ested (applica	(applicable to nrt's considerat n installments. able to chapter nrt's considerat	tion certify: Rule 1006	ing that the (b). See Office als only). Mu	t Check	Debtor is not k if: Debtor's agg are less than k all applicabl A plan is bei Acceptances	regate nonco \$2,490,925 ( e boxes: ng filed with of the plan v	ontingent liquids amount subject this petition.	defined in 11 U ated debts (exc to adjustment	one or more classes of cr	ee years thereafter).
Debtor e	stimates that stimates that	at funds will at, after any	ation be available exempt prop for distribut	erty is ex	cluded and	administra		es paid,		THIS	SPACE IS FOR COURT	USE ONLY
Estimated N  1- 49	umber of C	reditors  100- 199	□ 200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A  So to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,000 to \$100 million	1 \$100,000,000 to \$500 million	\$500,000,001 to \$1 billion				
Estimated Li	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,000 to \$100 million	1 \$100,000,000 to \$500 million	\$500,000,001 to \$1 billion				

Case 14-30583-lkg Doc 1 Filed 04/10/14 Page 2 of 54

**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Banks, Annette M (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). X /s/ Morgan R. Teague ☐ Exhibit A is attached and made a part of this petition. April 10, 2014 Signature of Attorney for Debtor(s) (Date) Morgan R. Teague 62614 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13) Page 3

# **Voluntary Petition**

(This page must be completed and filed in every case)

## Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Annette M Banks

Signature of Debtor Annette M Banks

 $\mathbf{X}$ 

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

April 10, 2014

Date

### Signature of Attorney\*

### X /s/ Morgan R. Teague

Signature of Attorney for Debtor(s)

### Morgan R. Teague 62614

Printed Name of Attorney for Debtor(s)

### A & L, Licker Law Firm

Firm Name

1861 Sherman Dr St. Charles, MO 63303

Address

# Email: Tobias@lickerlawfirm.com (636) 916-5400 Fax: (636) 916-5402

Telephone Number

April 10, 2014

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Banks, Annette M

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

<b>T</b> 7
X
Z3

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

	_			
٩	٧	v	•	
	١,	8		

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

# **United States Bankruptcy Court Southern District of Illinois**

In re	Annette M Banks		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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Best Case Bankruptcy

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
* · · · · · · · · · · · · · · · · · · ·	\$ 109(h)(4) as impaired by reason of mental illness or alizing and making rational decisions with respect to
• •	109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or
☐ Active military duty in a military c	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Annette M Banks
Date: April 10, 2014	Annette M Banks
Date. April 10, 2014	

B 6 Summary (Official Form 6 - Summary) (12/13)

# **United States Bankruptcy Court** Southern District of Illinois

In re	Annette M Banks		Case No.	
		Debtor	,	
			Chapter	7

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	275,543.00		
B - Personal Property	Yes	3	93,622.21		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		318,341.32	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		486,199.31	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,310.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,236.99
Total Number of Sheets of ALL Schedu	ıles	20			
	To	otal Assets	369,165.21		
			Total Liabilities	804,540.63	

# **United States Bankruptcy Court** Southern District of Illinois

In re	Annette M Banks		Case No		
-		Debtor	,		
			Chapter	7	

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

### State the following:

Average Income (from Schedule I, Line 12)	3,310.00
Average Expenses (from Schedule J, Line 22)	3,236.99
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,007.50

### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		53,546.27
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		486,199.31
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		539,745.58

## Case 14-30583-lkg Doc 1 Filed 04/10/14 Page 8 of 54

B6A (Official Form 6A) (12/07)

In re	Annette M Banks	Case No.	
_		Debtor	

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Former Residence: Location: 3517 Langford Lane, Shiloh, IL 62221	Fee Simple	-	235,000.00	288,546.27
Rental Property 80 West Adams, Cahokia, IL 62206	Fee Simple	-	40,543.00	29,795.05

Sub-Total > 275,543.00 (Total of this page)

275,543.00 Total >

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Annette M Banks	Case No
-		Debtor ,

# SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or	Checking Account: Location: Bank Of America	-	0.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit	Savings Account: Personal Savings Location: Bank Of America	-	0.00
	unions, brokerage houses, or cooperatives.	Checking Account Scott Credit Union	-	10.00
		Savings Account Scott Credit Union	-	10.00
		FCB Bank Checking Account	-	0.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Misc Used Household Goods and Furnishings including living room set, bedroom set, dining room set, kitchenware	<u>-</u>	2,225.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	Clothing and Shoes	-	150.00
7.	Furs and jewelry.	Costume Jewelry	-	50.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	life insurance through employer Term Life- no cash value	-	0.00
		(Total	Sub-Tota of this page)	al > <b>2,445.00</b>

**2** continuation sheets attached to the Schedule of Personal Property

In re	Annette M Banks	Case No.

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing		401K through employer	-	33,187.19
	plans. Give particulars.		Pension through employer	-	55,017.02
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

88,204.21 Sub-Total > (Total of this page)

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

In re	Annette M Banks	Case No.

Debtor

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O	Description and Location of Propert	Husband, Wife,	Current Value of Debtor's Interest in Property,
	Type of Floperty	N E	Description and Eccation of Property	Joint, or	without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	х			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	99	Lexus 300, 170,000 miles, fair condition	-	2,973.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			
				Sub-Tota (Total of this page)	al > 2,973.00
				(Total of this page) Tot	al > <b>93,622.21</b>

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Annette M Banks	Case No
-		, Debtor

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte
□ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 U.S.C. 8522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C	ertificates of Deposit		
Checking Account Scott Credit Union	735 ILCS 5/12-1001(b)	10.00	10.00
Savings Account Scott Credit Union	735 ILCS 5/12-1001(b)	10.00	10.00
Household Goods and Furnishings Misc Used Household Goods and Furnishings including living room set, bedroom set, dining room set, kitchenware	735 ILCS 5/12-1001(b)	2,225.00	2,225.00
Wearing Apparel Clothing and Shoes	735 ILCS 5/12-1001(a)	150.00	150.00
Furs and Jewelry Costume Jewelry	735 ILCS 5/12-1001(b)	50.00	50.00
Interests in IRA, ERISA, Keogh, or Other Pension o	r Profit Sharing Plans		
401K through employer	735 ILCS 5/12-1006	33,187.19	33,187.19
Pension through employer	735 ILCS 5/12-1006	55,017.02	55,017.02
Automobiles, Trucks, Trailers, and Other Vehicles 99 Lexus 300, 170,000 miles, fair condition	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b)	2,400.00 573.00	2,973.00

Total: 93,622.21 93,622.21 B6D (Official Form 6D) (12/07)

In re	Annette M Banks	Case No.
•		Debtor

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	16	1			111		A COLD TO CO.	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	I N G	021-00-04-ш0	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxx7027			05/24/2004	╵	E			
PNC PO BOX 1820 Dayton, OH 45401		-	Home Mortgage 1st  Former Residence: Location: 3517 Langford Lane, Shiloh, IL 62221  Value \$ 235,000.00		ט	x	234,788.78	0.00
Account No. xxxxxxxxxxxx8914			05/24/2004					
PNC Bank PO Box 3180 Pittsburgh, PA 15222		-	Home Mortgage 2nd Former Residence: Location: 3517 Langford Lane, Shiloh, IL 62221			x		
			Value \$ 235,000.00				53,757.49	53,546.27
Account No. xxxxxx5669  Regions Mortgage PO Box 18001 Hattiesburg, MS 39404-8001		-	Mortgage Rental Property 80 West Adams, Cahokia, IL 62206  Value \$ 40,543.00				29,795.05	0.00
Account No.	1		10,000	П				
			Value \$	ubto	otal		040.044.00	50.540.07
continuation sheets attached			(Total of the	nis p	ag	e)	318,341.32	53,546.27
			(Report on Summary of Sc		ota ule		318,341.32	53,546.27

B6E (Official Form 6E) (4/13)

•		
In re	Annette M Banks	Case No.
-		, Debtor

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
□ Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
□ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
□ Deposits by individuals  Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

0 continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re	Annette M Banks	Case	No
		Debtor	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

(See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NGEN	UNL QU L DAT	ן ן	U T F	AMOUNT OF CLAIM
Account No. xxxx2523			2014   Utility Bill	Т	E			
American Bottoms Regional Wastewater Treatement PO Box 459 East Saint Louis, IL 62202-0459		-	Cunty Bin					Unknown
Account No. xxxxxxxx9206****			07/2003	Т	Π	T	T	
Bank of America PO Box 982235 El Paso, TX 79998-2235		-	Credit Card					6,655.00
Account No. <b>xxxxxx9956****</b>		$\vdash$	07/2007	╄	┝	╀	$\dashv$	3,000.00
Bank of America PO Box 982235 El Paso, TX 79998		_	Line of credit					24,772.00
Account No. xxxxxx8518			815 St. Monica Mortgage	T	T	T	7	
Bank of America Home Loans 4161 Piedmont Pkwy Greensboro, NC 27410		-						25,284.82
		匚		$\perp$	$\perp$	Ļ	4	20,20-1.02
_6 continuation sheets attached			(Total of t	Subt his			)	56,711.82

In re	Annette M Banks		Case No	
_		Debtor		

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	С	Ни	sband, Wife, Joint, or Community	Пс	Τυ	D	Ī
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L I Q	I S P U T E	AMOUNT OF CLAIM
Account No. xxxxxx8123			1925 N 47th Mortgage	Т	E		
Bank of America Home Loans 4161 Piedmont Pkwy Greensboro, NC 27410		-			D		30,267.89
Account No. xxxxxx0128	$\dagger$		110 N. 71st Mortgage				,
Bank of America Home Loans 4161 Piedmont Pkwy Greensboro, NC 27410		-					
	L			$\perp$			23,623.49
Account No. xxxxxx7025  Bank of America Home Loans 4161 Piedmont Pkwy Greensboro, NC 27410		-	523 N 46 Mortgage				23,162.27
Account No. xxxxxxxxx3683	╁		#2 Emery 1st Mortgage	+			
Bank of America Home Loans 4161 Piedmont Pkwy Greensboro, NC 27410		-					70,669.25
Account No. xxxxxxxxxx3499	$\dagger$	$\vdash$	#2 Emery 2nd Mortgage	+	$\vdash$	$\vdash$	
Bank of America Home Loans 4161 Piedmont Pkwy Greensboro, NC 27410		-					21,216.00
Sheet no. 1 of 6 sheets attached to Schedule of	_	<u> </u>	1	Sub	tota	al	160 020 00
Creditors Holding Unsecured Nonpriority Claims			(Total o	f this	pag	ge)	168,938.90

In re	Annette M Banks	Case No.
_		Debtor

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

				1.		-	
CREDITOR'S NAME,	CODEBTO	Hu	sband, Wife, Joint, or Community	CONT.	UNL	D	
MAILING ADDRESS	D	Н	DATE CLAIM WAS INCURRED AND	N	ŀ	S	
INCLUDING ZIP CODE,	В	W	CONSIDERATION FOR CLAIM. IF CLAIM	11	Q U	ΰ	
AND ACCOUNT NUMBER	T	J	IS SUBJECT TO SETOFF, SO STATE.	N	ľ	U T E	AMOUNT OF CLAIM
(See instructions above.)	Ř	С	is sobtler to seron, so simile.	N G E N	ח	Ď	
Account No. <b>1475</b> ****		H	05/25/2011	ï	A T E		
	ł		Collections (HSBC Consumer Lending)		D		
Cavalry Portfolio Svcs			,				1
		l_					
500 Summit Lake Drive, Ste 4A							
Valhalla, NY 10595							
							20.047.00
							38,647.00
Account No. xxx-xx-			2014				
	1		Medical bill				
Christain Northeast Hospital							
5620 Southwyck Blvd		-					
Toledo, OH 43614							
,							
							Unknown
	┡		05/0040	+			
Account No. <b>xx8734</b> ****			05/2010				
			Collections (Charter Communications)				
Credit Portection							
One Galleria Tower		-					
13355 Noel Road S							
Dallas, TX 75240							
							53.00
Account No. xxx-xx-			2014	+			
Account No. AAA-AA-	ł		Utility Bills				
Foot Side Sowers			Other Bird				
East Side Sewers							
1808 Mullens Ave		ľ					
East Saint Louis, IL 62206							
							Unknown
Account No. xxxxxxxx8FD0****			11/2010				
	i		Student Loan				
Fed Loan Serv		1					
Po Box 69184		l_					
Harrisburg, PA 17106		1					
I lainsburg, FA 17 100							
							F 500 00
	L			$\perp$			5,500.00
Sheet no. 2 of 6 sheets attached to Schedule of				Subt	tota	1	44 000 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	44,200.00

In re	Annette M Banks	Case No.	
_		Debtor	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	l c	ш	sband, Wife, Joint, or Community		Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	DALLQULDAFE	I S P U T F	AMOUNT OF CLAIM
Account No. xxxxxxxxx8FD0****			11/2010	Т	T E		
Fed Loan Serv Po Box 69184 Harrisburg, PA 17106		-	Student Loan		D		7,000.00
Account No. xxxxxxxxx8FD0****	┢		09/2011	+	┢	┢	
Fed Loan Serv Po Box 69184 Harrisburg, PA 17106		-	Student Loan				5,500.00
Account No. xxxxxxxxx8FD0****			09/2011				
Fed Loan Serv Po Box 69184 Harrisburg, PA 17106		_	Student Loan				7,000.00
Account No. xxxxxxxxx8FD0****			10/2012				
Fed Loan Serv Po Box 69184 Harrisburg, PA 17106		-	Student Loan				2,867.00
Account No. xxxxxxxxx8FD0****			10/2012	+			
Fed Loan Serv Po Box 69184 Harrisburg, PA 17106		-	Student Loan				4,878.00
Sheet no. <b>3</b> of <b>6</b> sheets attached to Schedule of			1	Sub	tota	ıl	07.045.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	27,245.00

In re	Annette M Banks	Case No.	
_		Debtor	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	С	н	sband, Wife, Joint, or Community	I c	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Q	Į U	AMOUNT OF CLAIM
Account No. xxxxxxxx4818****			02/2007	Т	T		
GECRB/JC Penneys PO Box 965007 Orlando, FL 32896		-	Charge Off		D		4,667.00
Account No. xxxxxx9333	t		7108 Edna Mortgage		H	H	
GMAC Mortgage PO Box 4622 Waterloo, IA 50704		-					39,000.00
Account No. xx-xxxx658-1	┢		02/2013	+	H		
Illinois American Water PO Box 578 Alton, IL 62002		-	Utility Bill				Unknown
Account No. x6710	1		10/2013				
Law Offices of Susan Parnell Wilson 14 S Second Street Belleville, IL 62220		-	Legal Fees				1,545.07
Account No. xxxxxxxx8818	╁		2/24/2014	+	$\vdash$	$\vdash$	, -
Memorial Hospital PO Box 739 Moline, IL 61265	-	-	Medical bill				643.67
Sheet no. 4 of 6 sheets attached to Schedule of	_	_		Sub	tota	ıl	<b></b>
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	45,855.74

In re	Annette M Banks	Case No.	
_		Debtor	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	I۲	ш	sband, Wife, Joint, or Community	- 1	c I	υl	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAI IS SUBJECT TO SETOFF, SO STATE.	M	N G		SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxx9135			1148 St. Rose, Mortgage		Т	E		
Regions Mortgage PO Box 18001 Hattiesburg, MS 39404-8001		-				D		20,749.33
Account No. xxxxxxxx1936	t		8206 Carol Mortgage					
Regions Mortgage PO Box 18001 Hattiesburg, MS 39404-8001		-						43,459.66
Account No. xxxxxx1425	t		2512 Natalie 1st Mortgage					
Suntrust Mortgage PO Box 85526 Richmond, VA 23285		-						67,153.75
Account No. xxxxxx1433	┢		2512 Natalie 2nd Mortgage					,
Suntrust Mortgage PO Box 85526 Richmond, VA 23285	-	-						11,799.11
Account No. xxx6991	╁	-	04/2009				$\dashv$	,
United Revenue Corp 204 Billings St, Ste 120 Arlington, TX 76010	-	-	Collections					25.00
Sheet no. 5 of 6 sheets attached to Schedule of	_	_		Su	ıbt	otal		442 400 05
Creditors Holding Unsecured Nonpriority Claims			(Tot	ıl of thi	is p	pag	e)	143,186.85

In re	Annette M Banks	Case No.
_		Debtor

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	1.	1		Τ_	T	-	1
CREDITOR'S NAME,	0		sband, Wife, Joint, or Community	- 6	N	ľ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UZLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
(See instructions above.)	R	ľ		E N	D A	D	
Account No. xxx5233			08/2009	] ⊤	T		
	1		Collections	$\vdash$	D		
United Revenue Corp	ı						
204 Billings St, Ste 120	ı	-					
Arlington, TX 76010	ı						
	ı						
	ı						61.00
A	╀	┢		+	⊢	╀	
Account No.	1						
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Account No.	1			+	H	H	
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Account No.				Т			
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Account No.	1						
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Sheet no. <b>_6</b> of <b>_6</b> sheets attached to Schedule of	-	1	1	Subt	tot:	1	
							61.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	n1S	pag	ge)	
				Т	Γota	al	
			(Report on Summary of So	hec	lule	es)	486,199.31

# Case 14-30583-lkg Doc 1 Filed 04/10/14 Page 22 of 54

B6G (Official Form 6G) (12/07)

In re	Annette M Banks	Case No
		Debtor

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

H&L Builders 615 U.S. 50 O Fallon, IL 62269 Residence Lease

## Case 14-30583-lkg Doc 1 Filed 04/10/14 Page 23 of 54

B6H (Official Form 6H) (12/07)

In re	Annette M Banks	Case No.	
_		Debtor	

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill	in this information to identify your cas-	e:						
	otor 1 Annette M Ba							
_	otor 2				-			
Uni	ted States Bankruptcy Court for the:	SOUTHERN DISTRIC	CT OF ILLINOIS		_			
	se number own)		-				d filing nt showing post-petion	ion chapter 13
O	fficial Form B 6I					MM / DD/ Y		
	chedule I: Your Inco	ome				IVIIVI / DD/ Y	111	12/13
corr sepa	as complete and accurate as possib ect information. If you are married a arated and your spouse is not filing n. On the top of any additional pages	nd not filing jointly, and y with you, do not include	your spouse is living with information about your s	you, pouse	includ e. If mo	le information abore space is need	out your spouse. If	you are
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spous	e
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			☐ Emplo	•	
	employers.	Occupation	Unemployed					
	Include part-time, seasonal, or self-employed work.	Employer's name						
	Occupation may include student or homemaker, if it applies.	Employer's address						
		How long employed th	ere?					
Pa	t 2: Give Details About Month	nly Income						
	mate monthly income as of the date ss you are separated.	you file this form. If you	have nothing to report for	any lin	e, write	e \$0 in the space.	Include your non-filir	ng spouse
	ou or your non-filing spouse have more ce, attach a separate sheet to this form		bine the information for all	emplo	yers fo	or that person on t	he lines below. If you	u need more
					F	For Debtor 1	For Debtor 2 or non-filing spouse	9
2.	List monthly gross wages, salary, If not paid monthly, calculate what the			2.	\$	0.00	\$ <b>N</b>	I/A
3.	Estimate and list monthly overtime	e pay.		3.	+\$	0.00	+\$ <u> </u>	I/A_
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$	0.00	\$N/A	<u> </u>

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Deb	otor 1	Annette M Banks		(	Case	number (if kn	า๐พก)	_				
						Debtor 1			non	Debtor 2		
	Cop	by line 4 here	4.		\$		0.00	-	\$		N/A	-
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$		0.00	_	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		0.00	_	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$ <u> </u>		0.00	_	<u>\$</u> _		N/A	_
	5e.	Insurance  Domestic support obligations	5e.		<u></u> \$_		0.00	_	<u>\$</u> _		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.		\$_ \$		0.00	_	ф —		N/A	_
	5g. 5h.	Other deductions. Specify:	5g. 5h.	-	\$ _		0.00	_	- \$ - \$		N/A N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		* <u> </u>		0.00	_	* <u>-</u>		N/A	<del>-</del>
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ \$		0.00		\$		N/A	_
7. 8.		all other income regularly received:	• •		Ψ_		0.00	-	Ψ_		1475	
٥.	Ba.	Net income from rental property and from operating a business,										
		profession, or farm										
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	8a.	ì.	\$		0.00		\$		N/A	
	8b.	Interest and dividends	8b.	).	\$		0.00	_	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent						•	_			
		regularly receive Include alimony, spousal support, child support, maintenance, divorce										
		settlement, and property settlement.	8c.	<b>:</b> .	\$		0.00		\$		N/A	
	8d.	Unemployment compensation	8d.		\$_		0.00	_	\$_		N/A	_
	8e.	Social Security	8e.	<b>)</b> .	\$		0.00	_	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						-	_			
		Specify:	8f.		\$		0.00	_	\$		N/A	=
	8g.	Pension or retirement income	8g.	J.	\$		0.00	_	\$_		N/A	-
	8h.	Other monthly income. Specify: Net Severence Pay (Bank of America)	8h.	٠+	\$	2,10	0.00	+	- \$		N/A	
		· · · · · · · · · · · · · · · · · · ·		 	<u> </u>			- 1				¬
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	\$	3,310	0.00	] ' 	\$_		N/A	7
10.		culate monthly income. Add line 7 + line 9.	10.	\$		3,310.00	+ \$	į		N/A	= \$	3,310.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L				J L					
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule J. ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avacify:	dependen	,	,		•		:hedu 	ıle J. 11.	+\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result e that amount on the Summary of Schedules and Statistical Summary of Certain							applies	s 12.	\$	3,310.00
											Combine	
13.	Do y □	you expect an increase or decrease within the year after you file this form? No.										
		Yes. Explain: Unemployment income will decrease. Debtor wa months.	as only	ар	pro	ved for u	inem	pl	oyme	ent ince	ome for	up to 5

Fill	in this information to identify ye	our case:					
Dah	ton 1 Ammatta M	Danka		Charle	if this is:		
Deb	tor 1 Annette M	Banks		_			
ъ .	2				amended filing		
	tor 2 buse, if filing)					post-petition chapter 13	
(Spo	buse, if fiffig)			exp	penses as of the follo	wing date:	
Unit	ed States Bankruptcy Court for	the: SOUTHERN DISTRICT OF ILLING	DIS	N	MM / DD / YYYY		
Case	e number			Па	senarate filing for De	btor 2 because Debtor 2	
(If k	nown)				intains a separate ho		
Sc Be a		ossible. If two married people are filing tog ded, attach another sheet to this form. On t				et	2/13
Dowt	1. D V	313					
Part 1.	Is this a joint case?	enoid					
1.	-						
	No. Go to line 2.						
	☐ Yes. Does Debtor 2 live	in a separate household?					
	□ No						
		ust file a separate Schedule J.					
2.	Do you have dependents?	■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	nip to	Dependent's age	Does dependent live with you?	
	Do not state the dependents'					□ No	
	names.					☐ Yes	
						□ No	
						☐ Yes	
						□ No	
			-			Yes	
						□ No	
						☐ Yes	
3.	Do your expenses include	■ No					
	expenses of people other tha						
	yourself and your dependen	is?					
Part	2: Estimate Your Ongoi	ing Monthly Expenses					
Esti expe	mate your expenses as of you	r bankruptcy filing date unless you are usin nkruptcy is filed. If this is a supplemental S					
		on-cash government assistance if you know d it on <i>Schedule I: Your Income</i> (Official Fo			Your expe	enses	
4.	The rental or home ownersh any rent for the ground or lot.	nip expenses for your residence. Include first	mortgage payments and	4. \$		1,350.00	
	If not included in line 4:						
	4a. Real estate taxes			4a. \$		0.00	
	4b. Property, homeowner's	s, or renter's insurance		4b. \$		0.00	
		pair, and upkeep expenses		4c. \$		0.00	
		tion or condominium dues		4d. \$		0.00	
5.		nts for your residence, such as home equity l	oans	5 S		0.00	

# 

s: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:  Gas  Satellite Cell Phone Internet Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services Il and dental expenses	6a. \$ 6b. \$ 6c. \$ 6d. \$ \$ 7. \$ 8. \$ 9. \$	200.00 40.00 19.99 89.00 98.00 71.00 49.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:  Gas Satellite Cell Phone Internet Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services	6b. \$ 6c. \$ 6d. \$ \$ \$ 7. \$ 8. \$	40.00 19.99 89.00 98.00 71.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:  Satellite Cell Phone Internet Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services	6b. \$ 6c. \$ 6d. \$ \$ \$ 7. \$ 8. \$	40.00 19.99 89.00 98.00 71.00
Telephone, cell phone, Internet, satellite, and cable services  Other. Specify:  Satellite  Cell Phone Internet Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services	6c. \$ 6d. \$ \$ \$ 7. \$ 8. \$	19.99 89.00 98.00 71.00
Other. Specify: Gas  Satellite  Cell Phone Internet Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services	6d. \$ \$ \$ 7. \$ 8. \$	89.00 98.00 71.00
Satellite Cell Phone Internet Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services	\$ \$ \$ 7. \$ 8. \$	98.00 71.00
Cell Phone Internet Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services	\$ \$ 7. \$ 8. \$	71.00
Internet  Ind housekeeping supplies  In are and children's education costs  In ag, laundry, and dry cleaning  In all care products and services	7. \$ 8. \$	
nd housekeeping supplies are and children's education costs ng, laundry, and dry cleaning al care products and services	7. \$ 8. \$	
are and children's education costs ng, laundry, and dry cleaning al care products and services	8. \$	
ng, laundry, and dry cleaning al care products and services	· .	450.00
al care products and services	9. \$	0.00
	10 0	80.00
l and dental expenses	10. \$	100.00
	11. \$	100.00
ortation. Include gas, maintenance, bus or train fare.	12. \$	400.00
include car payments.	· .	
ninment, clubs, recreation, newspapers, magazines, and books	· .	100.00
able contributions and religious donations	14. \$	0.00
	15a \$	0.00
	· ·	0.00
	· · · · · · · · · · · · · · · · · · ·	
		0.00
	13u. ş	90.00
:	16. \$	0.00
	· · · · · · · · · · · · · · · · · · ·	0.00
* *		0.00
• •	17c. \$	0.00
Other. Specify:	17d. \$	0.00
ayments of alimony, maintenance, and support that you did not report as deduct		0.00
	· .	0.00
		0.00
		0.00
	· ·	0.00
		0.00
	•	0.00
		0.00
		0.00
Specify:	21. +\$	0.00
• •	22. \$	3,236.99
	22 #	0.040.00
	· · · · · · · · · · · · · · · · · · ·	3,310.00
Copy your monthly expenses from line 22 above.	23b\$	3,236.99
	23c. \$	73.01
	include insurance deducted from your pay or included in lines 4 or 20.  Life insurance  Health insurance  Other insurance. Specify: renters, auto, flood  Do not include taxes deducted from your pay or included in lines 4 or 20.  Tement or lease payments:  Car payments for Vehicle 1  Car payments for Vehicle 2  Other. Specify:  Other. Specify:  Other. Specify:  ayments of alimony, maintenance, and support that you did not report as deduct ay on line 5, Schedule I, Your Income (Official Form 61).  payments you make to support others who do not live with you.  Teal property expenses not included in lines 4 or 5 of this form or on Schedule I:  Mortgages on other property  Real estate taxes  Property, homeowner's, or renter's insurance  Maintenance, repair, and upkeep expenses  Homeowner's association or condominium dues  Specify:  monthly expenses. Add lines 4 through 21.  ult is your monthly expenses.  ate your monthly net income.  Copy line 12 (your combined monthly income) from Schedule I.  Copy your monthly expenses from line 22 above.  Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	include insurance deducted from your pay or included in lines 4 or 20.  Life insurance 15a. \$ Health insurance 15b. \$  Wehicle insurance Specify: renters, auto, flood 15d. \$  Do not include taxes deducted from your pay or included in lines 4 or 20.  Tenter spayments:  Car payments for Vehicle 1 17a. \$  Car payments for Vehicle 2 17b. \$  Other. Specify: 17c. \$  Other. Specify: 17c. \$  ayments of alimony, maintenance, and support that you did not report as deducted from your pay or line 5, Schedule 1, Your Income (Official Form 61).  payments of alimony, maintenance, and support that you did not report as deducted from you make to support others who do not live with you.  Tenter property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  Mortgages on other property  Evaluate taxes  Property, homeowner's, or renter's insurance  Maintenance, repair, and upkeep expenses  Homeowner's association or condominium dues  Specify: 21. +\$  nonthly expenses. Add lines 4 through 21.  ult is your monthly expenses from line 22 above.  Subtract your monthly expenses from your monthly income.  The result is your monthly expenses from your monthly income.  The result is your monthly expenses in your expenses within the year after you file this form?  upte, do you expect to finish paying for your car loan within the year of do you expect your mortgage payment to increase or care of the payment to increase or do you expect your mortgage payment to increase or care of the payment to increase or do you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect your mortgage payment to increase or care of you expect

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court Southern District of Illinois**

In re	Annette M Banks			Case No.	
			Debtor(s)	Chapter	7
					<b>T</b> .0
	DECLARATION CO	ONCERN	ING DEBTOR'S SC	CHEDUL	ES
	DECLARATION UNDER I	PENALTY (	OF PERJURY BY INDIVID	UAL DEBT	OR
	I declare under penalty of perjury that sheets, and that they are true and correct to the				consisting of22
Date	April 10, 2014	Signature	/s/ Annette M Banks Annette M Banks Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# United States Bankruptcy Court Southern District of Illinois

In re	Annette M Banks		Case No.	
		Debtor(s)	Chapter	7

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7111100111	BOUNCE
\$46,826.02	2013 Bank Of America
\$52,034.00	2012 Bank Of America
\$2,000.00	2012 Ideal Way to Work, LLC
\$2,000.00	2013 Ideal Way to Work, LLC
\$13.369.65	2014 Bank of America

SOURCE

AMOUNT

### 2. Income other than from employment or operation of business

None 

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** SOURCE

\$840.00 2014 Unemployment Income

### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL **OWING** 

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF

**AMOUNT** PAID OR VALUE OF **TRANSFERS** 

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

PAYMENTS/ **TRANSFERS** 

None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses

whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF **PROCEEDING**  COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

 $<sup>^</sup>st$  Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

### 5. Repossessions, foreclosures and returns

None 

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER **Bank of America Home Loans** 4161 Piedmont Pkwy Greensboro, NC 27410

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN 11/6/2013

DESCRIPTION AND VALUE OF **PROPERTY** 

Rental Property, foreclosure, 815 St. Monica, Cahokia, IL Appraised Value: \$45,750, encumbered by \$25,284.82 mortgage

Property was awarded to ex-husband per divorce decree

### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF **ORDER** 

DESCRIPTION AND VALUE OF

**PROPERTY** 

### 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

A & L, Licker Law Firm 1861 Sherman Dr St. Charles, MO 63303 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 12/23/13 AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

\$750.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY LOCATION OF PROPERTY

#### 15. Prior address of debtor

None П

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** 3517 Langford Lane Belleville IL 62221-0000 NAME USED **Annette McCorkle**  DATES OF OCCUPANCY

2004-2012

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE LAW

None

Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT **NOTICE** LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

### 18. Nature, location and name of business

None 

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME (ITIN)/ COMPLETE EIN

Ideal Way to Work, 9629 LLC

**ADDRESS** 3517 Langford Lane

NATURE OF BUSINESS **Call Services** 

**BEGINNING AND ENDING DATES** 

07/2011-04/2013

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

Belleville, IL 62221

None

NAME **ADDRESS** 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

## 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

**NAME** 

**ADDRESS** 

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

**ADDRESS** 

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

7

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

### NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

#### NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

## 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

## NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date April 10, 2014 Signature /s/ Annette M Banks

e /s/ Annette M Banks
Annette M Banks
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

# **United States Bankruptcy Court Southern District of Illinois**

In re	Annette M Banks		Case No.	
		Debtor(s)	Chapter	7

#### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A -** Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

property of the estate. Attach	additional pages if necess	sary.)
Property No. 1		
Creditor's Name: PNC		Describe Property Securing Debt: Former Residence: Location: 3517 Langford Lane, Shiloh, IL 62221
Property will be (check one):		
■ Surrendered	☐ Retained	
If retaining the property, I intend to (checon Redeem the property Reaffirm the debt ☐ Other. Explain		d lien using 11 U.S.C. § 522(f)).
Property is (check one):		
■ Claimed as Exempt		☐ Not claimed as exempt
Property No. 2		
Creditor's Name: PNC Bank		Describe Property Securing Debt: Former Residence: Location: 3517 Langford Lane, Shiloh, IL 62221
Property will be (check one):		
■ Surrendered	☐ Retained	
If retaining the property, I intend to (checon Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain		d lien using 11 U.S.C. § 522(f)).
Property is (check one):		
■ Claimed as Exempt		☐ Not claimed as exempt

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B8 (Form 8) (12/08)		<u> </u>	Page 2
Property No. 3			
Creditor's Name: Regions Mortgage		Describe Property Rental Property 80 West Adams, Ca	G
Property will be (check one):			
■ Surrendered	☐ Retained		
If retaining the property, I intend to ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		id lien using 11 U.S.C.	§ 522(f)).
Property is (check one):	· · · · · · · · · · · · · · · · · · ·	-	
Claimed as Exempt		☐ Not claimed as ex	xempt
PART B - Personal property subject additional pages if necessary.)  Property No. 1	et to unexpired leases. (All three	columns of Part B must	t be completed for each unexpired lease. Attach
Lessor's Name: -NONE-	Describe Leased Pr	operty:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ YES ☐ NO
I declare under penalty of perjury personal property subject to an under Date April 10, 2014		/s/ Annette M Banks Annette M Banks Debtor	perty of my estate securing a debt and/or

## **United States Bankruptcy Court** Southern District of Illinois

In r	e An	nette M Bar	nks								Ca	se No.				
								Debt	or(s)		Ch	apter	7			
		DIS	CLO	SURE	OF C	OMPE	ENSAT	ION (	OF ATT	ORNE	Y FO	OR DE	ВТО	OR(S	)	
1.	paid to	nt to 11 U.S.C me within on of the debtor(	e year l	before the	filing of	the petition	on in bank	cruptcy, o	or agreed to l	be paid to	me, fo					
	Fo	or legal service	es, I hav	ve agreed	to accept	<u>:</u>					\$			750.00	<u>)                                    </u>	
		rior to the filin									\$			750.00	<u>)                                    </u>	
	Ba	alance Due									\$_			0.00	<u>)                                    </u>	
2.	The sou	urce of the co	mpensa	ation paid	to me wa	as:										
		Debtor		Other (sp	ecify):											
3.	The sou	urce of compe	nsation	ı to be pai	id to me i	is:										
	-	Debtor		Other (sp	ecify):											
4.	■ Ih	ave not agreed	l to sha	re the abo	ove-disclo	osed comp	pensation	with any	other perso	on unless th	ney are	e member	rs and a	associat	tes of my	law firm.
		ave agreed to the agreement											associ	ates of	my law f	irm. A copy
5.	In retu	rn for the abo	ve-disc	losed fee,	I have ag	greed to re	ender lega	l service	for all aspect	ts of the ba	ankrup	otcy case,	includ	ing:		
	<ul><li>b. Prep</li><li>c. Rep</li><li>d. Rep</li></ul>	alysis of the deparation and foresentation of oresentation of the provisions	iling of f the de f the de	any petiti btor at the btor in ad	ion, sched e meeting	dules, stat g of credit	tement of ors and co	affairs ar onfirmati	nd plan which on hearing, a	th may be a and any ad	equire journe	ed;			ankruptcy	y;
6.	By agre		hapte	r 7 cases	s, the le	gal serv	ices whi	ich are l	the followin beyond the listed belo	ose conte	empla	ited in th	ne bas	se fee	must no	netheless
		(a) Repres	senting	g the De	btor in a	any disc	hargeab	ility pro	ceeding, ir	ncluding	stude	ent Ioan	discl	harge	proceed	lings.
		(b) Repres	sentin	g the De	btor in a	any cont	tested m	otion to	avoid any	type of a	lien	or judgr	ment.			
		(c) Repres	senting	g the De	btor in a	a motion	to conti	nue the	Automatic	c Stay.						
		(d) Repres Automatio				any cont	tested m	atters o	r adversar	ry procee	dings	s related	l to th	e enfo	rcemen	t of the
		(e) Repres	senting	g the De	btor in a	any actio	on to enf	orce the	e Discharg	je injunct	ion o	r enforc	e the	Autor	natic Sta	ay.
			707(a)	or 707(b	o) of the	Bankru			e enforcer pt as prov		ne					
		(g) Repres			Debtor in	n any co	ntested	motions	for relief	from the						
		(h) Repres	sentin	g the De	btor in a	any moti	ons to re	edeem e	exempt per	rsonal pr	opert	y.				
		(i) Repres	enting	the Deb	otor in a	ny conte	ested ma	itter reg	arding the	Debtor's	clair	n of exe	mpt p	ropert	ty.	

(j) Filing any amendments to the Schedules, unless the amendment arises out of a mistake by the Attorney.

In re Annette M Banks Case No.

Debtor(s)

#### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

- (k) Filing a motion to continue the 341 meeting of creditors at the request of the Debtor.
- (I) Filing of motions to abandon property.
- (m) Representing the Debtor in any other matters not specifically designated as a Base Fee Service in this Agreement.
- (n) Representing the Debtor if the US Trustee's office requests additional information regarding the Debtor's income and ability to qualify for a Chapter 7 bankruptcy.
- (o) Defending a motion for relief from stay
- (p) Motions for Redemption
- (q) Motions to Continue the Automatic Stay
- (r) Reviewing, advising, and signing Reaffirmation Agreements

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: April 10, 2014 /s/ Morgan R. Teague

Morgan R. Teague 62614 A & L, Licker Law Firm 1861 Sherman Dr St. Charles, MO 63303

(636) 916-5400 Fax: (636) 916-5402

Tobias@lickerlawfirm.com

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

B 201B (Form 201B) (12/09)

### **United States Bankruptcy Court** Southern District of Illinois

		Southern District of Illinois		
In re	Annette M Banks		Case No.	
		Debtor(s)	Chapter	7
		N OF NOTICE TO CONSUMER 342(b) OF THE BANKRUPTCY		R(S)
Code.	I (We), the debtor(s), affirm that I (we) ha	Certification of Debtor ave received and read the attached notice, as	required by	§ 342(b) of the Bankruptcy
Annet	te M Banks	X /s/ Annette M Bank	S	April 10, 2014
Printed	d Name(s) of Debtor(s)	Signature of Debtor		Date
Case N	No. (if known)	X		

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# **United States Bankruptcy Court** Southern District of Illinois

In re	Annette M Banks		Case No.	
		Debtor(s)	Chapter	7
	<u>VERIFIC</u> A	ATION OF CREDITOR MATR	<u>alx</u>	
	The above named Debtor(s) le correct to the best of my/our knowle schedules.	hereby verify that the attached l dge and that it corresponds to the		
Date:	April 10, 2014	/s/ Annette M Banks Annette M Banks Signature of Debtor		

American Bottoms Regional Wastewater Treatement PO Box 459 East Saint Louis, IL 62202-0459

Bank of America PO Box 982235 El Paso, TX 79998-2235

Bank of America PO Box 982235 El Paso, TX 79998

Bank of America Home Loans 4161 Piedmont Pkwy Greensboro, NC 27410

Cavalry Portfolio Svcs 500 Summit Lake Drive, Ste 4A Valhalla, NY 10595

Christain Northeast Hospital 5620 Southwyck Blvd Toledo, OH 43614

Credit Portection One Galleria Tower 13355 Noel Road S Dallas, TX 75240

East Side Sewers 1808 Mullens Ave East Saint Louis, IL 62206

Fed Loan Serv Po Box 69184 Harrisburg, PA 17106

GECRB/JC Penneys PO Box 965007 Orlando, FL 32896

GMAC Mortgage PO Box 4622 Waterloo, IA 50704 Illinois American Water PO Box 578 Alton, IL 62002

Law Offices of Susan Parnell Wilson 14 S Second Street Belleville, IL 62220

Memorial Hospital PO Box 739 Moline, IL 61265

PNC PO BOX 1820 Dayton, OH 45401

PNC Bank PO Box 3180 Pittsburgh, PA 15222

Regions Mortgage PO Box 18001 Hattiesburg, MS 39404-8001

Suntrust Mortgage PO Box 85526 Richmond, VA 23285

United Revenue Corp 204 Billings St, Ste 120 Arlington, TX 76010

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B22A (Official Form 22A) (Chapter 7) (04/13)

In re Annette M Banks	
Debtor(s)	According to the information required to be entered on this statement
Case Number:	(check one box as directed in Part I, III, or VI of this statement):
(If known)	☐ The presumption arises.
	■ The presumption does not arise.
	☐ The presumption is temporarily inapplicable.

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
111	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and ☐ I remain on active duty /or/ ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	<ul> <li>b. □ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>□ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>

	Part II. CALCULATION OF MONTH	ILY INCOM	ME FOR § 707(I	)(7) E	EXCLUSION		
	Marital/filing status. Check the box that applies and comple	ete the balance	of this part of this sta	tement	as directed.		
	a. Unmarried. Complete only Column A ("Debtor's Inc	come'') for Lir	nes 3-11.				
2	<ul> <li>b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11.</li> </ul>						
	c.   Married, not filing jointly, without the declaration of so ("Debtor's Income") and Column B ("Spouse's Income")	me") for Lines	s 3-11.		_		
	d.  Married, filing jointly. Complete both Column A ("D All figures must reflect average monthly income received from			'Spous			
	calendar months prior to filing the bankruptcy case, ending or			e	Column A	Column B	
	filing. If the amount of monthly income varied during the six six-month total by six, and enter the result on the appropriate	months, you r			Debtor's Income	Spouse's Income	
3	Gross wages, salary, tips, bonuses, overtime, commissions	s.		\$	3,867.50	\$	
	Income from the operation of a business, profession or far	rm. Subtract L	ine b from Line a and		•		
	enter the difference in the appropriate column(s) of Line 4. If						
	profession or farm, enter aggregate numbers and provide deta number less than zero. <b>Do not include any part of the busin</b>						
4	deduction in Part V.	ness expenses	entered on Line b as	а			
•		Debtor	Spouse				
	a. Gross receipts \$	0.00					
	b. Ordinary and necessary business expenses \$	0.00					
		t Line b from L		\$	0.00	\$	
	Rent and other real property income. Subtract Line b from						
	appropriate column(s) of Line 5. Do not enter a number less the operating expenses entered on Line b as a deduction in		not include any part	of			
5		Debtor	Spouse	_			
	a. Gross receipts \$	0.00					
	b. Ordinary and necessary operating expenses \$	0.00	\$				
	c. Rent and other real property income Subtract	t Line b from L	ine a	\$	0.00	\$	
6	Interest, dividends, and royalties.			\$	0.00		
7	Pension and retirement income.			\$	0.00	\$	
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.					\$	
9	Unemployment compensation. Enter the amount in the apprif you contend that unemployment compensation received by under the Social Security Act, do not list the amount of such instead state the amount in the space below:  Unemployment compensation claimed to	y you or your s compensation	pouse was a benefit in Column A or B, bu				
	be a benefit under the Social Security Act Debtor \$	<b>0.00</b> Spo	ouse \$	\$	140.00	\$	
10		enance paymen of alimony or s y Act or payme	nts paid by your spo separate maintenance ents received as a vict	e.			
	a. \$   \$   \$   \$   \$		\$	$-\parallel$			
	Total and enter on Line 10		ΙΨ	\$	0.00	¢	
		Lings 2 thms 10	) in Column A and i		0.00	φ	
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Column B is completed, add Lines 3 through 10 in Column B			\$	4.007.50	\$	

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12	Total Current Monthly Income for § 707(b)(7). It Column A to Line 11, Column B, and enter the total the amount from Line 11, Column A.		\$		4,007.50		
	Part III. APPLIC	CATION OF § 707(b)(7) EXCLUSION	N				
13	Annualized Current Monthly Income for § 707(lenter the result.	<b>b)(7).</b> Multiply the amount from Line 12 by the n	umber 12 and	\$	48,090.00		
14	<b>Applicable median family income.</b> Enter the medi (This information is available by family size at www						
	a. Enter debtor's state of residence:	b. Enter debtor's household size:	1	\$	48,232.00		
	Application of Section 707(b)(7). Check the application	cable box and proceed as directed.		*			
15	■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.						
	☐ The amount on Line 13 is more than the amou	unt on Line 14. Complete the remaining parts of	this statement.				

### Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Mari   Column   Spect   or the devoide   17   2.c, e   a.   b.   c.   d.   Total   18   Curr	Daniel IV. CAT CITE							
17	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)							
17 Colu. Spec. or the devor 2.c, e a. b. c. d. Total 18 Curr  19A Nation Stand www. would deperson a line age c. 19B 19B 19B 19B	nter the amount from Line 12.					\$		
19A Nation Stand Www. would deperment of the last Care banks Line age content total amout amout all.	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.    S							
19A Stand www would deperment of the last care bank Line age content total amout amout all.	tal and enter on Line 17	(b)(2) Subtract Line	17 fuo ma	Line 16 and anton the manult		\$		
19A Stand www wouldeper  Natio Healt Care bank Line age coreturn total amou amou all.	irrent monthly income for § 707					φ		
19A Stand www wouldeper Natio Healt Care bank Line age contour total amout amout all.	Part V. CA	ALCULATION	OF D	EDUCTIONS FROM	INCOME			
19A Stand www wouldeper Natio Healt Care bank Line age contour total amout amout all.	Subpart A: De	ductions under Sta	ndard	s of the Internal Revenue	e Service (IRS)			
Healt Care bank Line age c return total amou amou	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					\$		
	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tareturn, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.  Persons under 65 years of age  Persons 65 years of age or older							
b1.			a2. b2.	Allowance per person Number of persons				
c1.			c2.	Subtotal		\$		
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.								

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your count at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court) (the at that would currently be allowed as exemptions on your federal income dependents whom you support); enter on Line b the total of the Average your home, as stated in Line 42; subtract Line b from Line a and enter amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rental expense  b. Average Monthly Payment for any debts secured by your home if any, as stated in Line 42			
	c. Net mortgage/rental expense	\$ Subtract Line b from Line a.	\$	
21	Local Standards: housing and utilities; adjustment. If you contend does not accurately compute the allowance to which you are entitled us enter any additional amount to which you contend you are entitled, and space below:	\$		
	T 10, 1 1 4 4 4 11 11 4 4 11 4		φ	
22A	Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.			
ZZA	$\square \ 0 \ \square \ 1 \ \square \ 2$ or more.			
	If you checked 0, enter on Line 22A the "Public Transportation" amout you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" a Transportation for the applicable number of vehicles in the applicable N (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of	\$		
22B	Local Standards: transportation; additional public transportation of a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Transportation. (This amount is available at www.usdoj.gov/ust/ or from	\$		
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1  2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly			
23	Payments for any debts secured by Vehicle 1, as stated in Line 42; sub Line 23. <b>Do not enter an amount less than zero.</b>	tract Line b from Line a and enter the result in		
	a. IRS Transportation Standards, Ownership Costs	\$		
	Average Monthly Payment for any debts secured by Vehicle 1,			
	b. as stated in Line 42	\$	Φ.	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.			
	a. IRS Transportation Standards, Ownership Costs	\$		
	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$		
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	
25	Other Necessary Expenses: taxes. Enter the total average monthly ex state and local taxes, other than real estate and sales taxes, such as inco security taxes, and Medicare taxes. Do not include real estate or sales	\$		
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.			
L	Do not include discretionary amounts, such as voluntary 401(K) contributions.			

0.0				
Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.			\$	
Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include</b>				
payments on past due obligations included in Line 44.				\$
Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.			\$	
Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.			\$	
Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.			\$	
Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.			\$	
Total E	xpenses Allowed under IRS Standards. Enter t	he total of Lines 19 through 32.		\$
	Subpart B: Additio	nal Living Expense Deductions		
	<del>-</del>	~ <b>.</b>	nes 19-32	
a.	Health Insurance	\$		
b.	Disability Insurance	\$		
c.	Health Savings Account	\$		\$
		our actual total average monthly expenditu	res in the space	
Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.			\$	
<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			\$	
Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.			\$	
Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.			\$	
Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.		\$		
	Other Norther Standard Trustee claimed Pother Standard Trustee claimed Pother Standard Standa	life insurance for yourself. Do not include premiums for other form of insurance.  Other Necessary Expenses: court-ordered payments. pursuant to the order of a court or administrative agency, payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment the total average monthly amount that you actually expeneducation that is required for a physically or mentally cha providing similar services is available.  Other Necessary Expenses: childcare. Enter the total a childcare - such as baby-sitting, day care, nursery and pre  Other Necessary Expenses: health care. Enter the total health care that is required for the health and welfare of you insurance or paid by a health savings account, and that is payments for health insurance or health savings account.  Other Necessary Expenses: telecommunication service pay for telecommunication services other than your basic waiting, caller id, special long distance, or internet service of your dependents. Do not include any amount previous Total Expenses Allowed under IRS Standards. Enter the Subpart B: Addition Note: Do not include any expenses are set out in lines a-c below that are reasonably noted to be accessed by the subject of the savings Account Total and enter on Line 34.  If you do not actually expend this total amount, state you below:  \$	ilide insurance for yourself. Do not include premiums for insurance on your dependents, for whother form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you a pursuant to the order of a court or administrative agency, such as spousal or child support payment payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challeng the total average monthly amount that you actually expend for education that is a condition of emp education that is required for a physically or mentally challenged dependent child for whom no pub providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually heighted are - such as baby-sitting, day care, nursery and preschool. Do not include other educational Other Necessary Expenses: health care, Enter the total average monthly amount that you actually health care that is required for the health and welfare of yourself or your dependents, that is not rein surrance or paid by a health savings account, and that is in excess of the amount entered in Line 19 ayments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount pay for telecommunication services other than your basic home telephone and cell phone service waiting, caller id, special long distance, or internet service - to the extent necessary for your health a of your dependents. Do not include any amount previously deducted.  Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.  Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Litelation of your spouse, or your leads of the properties of the properti	life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childrace. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basis home telephone and cell phone service - such as pagers, call waining, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.  Bubpart B: Additional Living Expense Deductions  Note: Do not include any expenses that you have listed in Lines

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

40	<b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).				\$		
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40					\$	
		S	Subpart C: Deductions for De	bt Payment	t		
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
	a.	Name of Creditor	Property Securing the Debt	Average MoPa	yment	Does payment include taxes or insurance?	\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.				nclude in your ne payments listed as in default that	Ψ	
	a.	Name of Creditor	Property Securing the Debt	\$			
						Total: Add Lines	\$
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.				\$		
45	a. b.	Projected average monthly cha Current multiplier for your dis issued by the Executive Office	trict as determined under schedules for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of		xpense		¢.
46	C.			Total. Multip	ly Line	s a and b	\$
46 Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.  Subpart D: Total Deductions from Income							
47	Total o		• § 707(b)(2). Enter the total of Lines 3.				\$
Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION							
48	Enter	the amount from Line 18 (Cur	rent monthly income for § 707(b)(2))				\$
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))			\$			
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.			\$			
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.			\$			
52	Initial presumption determination. Check the applicable box and proceed as directed.  ☐ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page and complete the verification in Part VIII. Do not complete the remainder of Part VI.  ☐ The amount set forth on Line 51 is more than \$12,475* Check the box for "The presumption arises" at the top of				f page 1 of this		
		statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.  The amount on Line 51 is at least \$7.475*, but not more than \$12.475*. Complete the remainder of Part VI (Lines 53 through 55).					

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<sup>\*</sup> Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

53	Enter the amount of your total non-priority unsecured debt	\$				
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 a	nd enter the result.	\$			
55	Secondary presumption determination. Check the applicable box and proceed as directed.  The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.  The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.					
Part VII. ADDITIONAL EXPENSE CLAIMS						
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in this fo you and your family and that you contend should be an additional deduction from your of the necessary, list additional sources on a separate page. All figures should reflect your averageneses.  Expense Description  a.	current monthly income under	§ 707(b)(2)(A)(ii)(I). h item. Total the			
Part VIII. VERIFICATION						
57	I declare under penalty of perjury that the information provided in this statement is true at must sign.)  Date: April 10, 2014 Signature: Is	nd correct. (If this is a joint of a second correct of Annette M Banks Annette M Banks (Debtor)	ase, both debtors			

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2013 to 03/31/2014.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Bank of America

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: **\$36,990.69** from check dated **9/30/2013**. Ending Year-to-Date Income: **\$46,826.02** from check dated **12/31/2013**.

This Year:

Current Year-to-Date Income: \$13,369.65 from check dated 3/31/2014 .

Income for six-month period (Current+(Ending-Starting)): \$23,204.98.

Average Monthly Income: **\$3,867.50**.

#### Line 9 - Unemployment compensation (included in CMI)

Source of Income: Unemployment Income

Income by Month:

6 Months Ago:	10/2013	\$0.00
5 Months Ago:	11/2013	\$0.00
4 Months Ago:	12/2013	\$0.00
3 Months Ago:	01/2014	\$0.00
2 Months Ago:	02/2014	\$0.00
Last Month:	03/2014	\$840.00
	Average per month:	\$140.00